

JUVENILE REHABILITATION ADMINISTRATION

YOUTH COMPLAINT - APPEAL REQUEST

YOUTH'S NAME	LOCATION	ETHNICITY	
YOUTH COMPLAINT/APPEAL PROCESS			
If you have a complaint about staff actions or decisions in violation of policies and procedures; or conditions of confinement; or policies and procedures, the following steps may be taken to resolve the matter:			
1. You should talk with your counselor or staff. There may be a misunderstanding that can be settled when the facts are reviewed.			
2. If talking with your counselor or staff does not resolve the problem to your satisfaction, complete this Youth Complaint - Appeal Request form and give it to a staff member or place it in the designated locked complaint box.			
3. If you still feel you have a complaint after the supervisor makes a decision, the request must then be sent to the Superintendent or Regional Administrator, or their designees, within seven days. You will receive a written response within seven days of the Superintendent, Regional Administrator, or designee receiving the appeal.			
4. If still dissatisfied, you may request the complaint be sent to the appropriate Juvenile Rehabilitation Administration Director or designee. The written decision you receive will be final.			
5. This procedure does not prevent you from obtaining legal counsel to pursue the complaint further. Ask staff if you need help with this form,			
I would like to complain about the following:			
Land the fellowing grant biting			
I seek the following resolution:			
STAFF INVOLVED (IF ANY)			
WITNESSES (IF ANY)			
YOUTH'S SIGNATURE			DATE
Date this request for Superintendent or regional administrator review was received:			
DESIGNATED SUPERVISOR'S ACTION			
SUPERVISOR'S SIGNATURE			DATE
I would like to appeal this decision to the Superintendent OR Regional Administrator: Yes No			
YOUTH'S SIGNATURE			DATE
SUPERINTENDENT, REGIONAL ADMINISTRATOR OR DESIGNEE'S REVIEW			
	,		
SUPERINTENDENT/REGIONAL ADMINISTRATOR'S OR	R DESIGNEE'S SIGNATURE		DATE
I would like the Director/Designee to review my complaint: ☐ Yes ☐ No			
YOUTH'S SIGNATURE			DATE
Date this request for Director/Designee review was received:			